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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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| TO: | Registration Se Division of Cor | | , | | | |
|--|------------------------------------|--|---|--------------------------|--------------|--------------|
| SUBJECT: Classic Man | | | rooming Products LLC | | | |
| 0000 | | Name of Lim | ited Liability Company | | | |
| The en | iclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | | | |
| Please | return all correspo | ondence concerning this matter | to the following: | | | |
| | | | Anjanette Mojica | | | |
| Name of Person | | | | | | |
| | | C | MC Grooming Products | | | |
| | | | Firm/Company | | | |
| 5437 Lake Margaret Dr, Unit C | | | | | | |
| | | | Address | | | |
| Orlando, Florida 32812 | | | | | <u>-</u> | |
| | | | City/State and Zip Code | | Σ_{2} | -201 |
| | | E-mail address: (| roducts@CMCGrooming to be used for future annual re | port notification) | L AI | 32-37 |
| For fu | rther information c | oncerning this matter, please $\mathfrak c$ | ali: | | KANT A | 2011-SEP-13_ |
| | Anja | anette Mojica | at (321) | 754-7560 | | 湿门 |
| | Name o | f Person | Area Code | Daytime Telephone Number | A GUNO | 2: 87 |
| Enclos | sed is a check for the | ne following amount: | | | 1 | |
| | 5.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclo | osed) Certified | te of Statu | |
| MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | Registratio Division o Clifton Bu | f Corporations | | | |

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Classic Man Groon | | |
|--|--|----------------------------------|
| (Name of the Limited Liability Compa (A Florida Limited) | ny as it now appears on our records. Liability Company) | |
| The Articles of Organization for this Limited Liability Company Florida document numberL18000164454 | were filed on | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liab | ility company here: | |
| CMC Grooming Prod | | |
| The new name must be distinguishable and contain the words "Limited Liabi | lity Company," the designation "LLC" or the abbr | eviation "L.L.C." |
| Enter new principal offices address, if applicable: | NIA | |
| (Principal office address MUST BE A STREET ADDRESS) | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | ffice address on our records, enter the: | ne name of the n |
| Name of New Registered Agent: | NIA | 200 |
| New Registered Office Address: | Enter Florida street address | 3 . |
| | City , Florida | Zip Sode |
| New Producted Agent's Signature, if changing Registered Agent: | - COATE | i i i |
| I hereby accept the appointment as registered agent and agreprovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change. | performance of my duties, and I am fan provided for in Chapter 605, F.S. Or lif | niliar with and this document |

If Changing Registered Agent, Signature of New Registered Agent

| MGR = Mai | nager | | |
|--------------|----------------|----------------|---|
| AMBR = Aut | horized Member | | |
| <u>Title</u> | Name | <u>Address</u> | Type of Action |
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| ective | date, if other that we date is listed, the da | n the date of filing | ig: | to date of filing or | | ptional) Her filing \ Pursuar | u to 605 020 |
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| cument | 's effective date on | the Department of | State's records. | | | | |
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| | d specifies a del | | | t an effective | time, at 12:0 | 1 a.m. on the | e earlier c |
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